

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	69360		
RESPONSE FORMALITY REVIEW	RR	170029	1-3-03

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) ... Canceled A ..... Appeal  
 ÷ ..... Restricted 0 ..... Objected

Claim	Date
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26	1/49
27	1/50

BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here